DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION					
		COMPLETE IF KNOWN			
(37 CFR 1.63)		/			
☐Declaration Submitted after Initial	Filing Date	CON	CURRENTLY		
Filing (surcharge	Group Art Unit				
required)	Examiner Name				
	ESIGN APPLICATION CFR 1.63) Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	First Named Inventor SIGN APPLICATION FR 1.63) Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) First Named Inventor CC Application Number Filing Date Group Art Unit	First Named Inventor COMPLE COMPLE Application Number Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	First Named Inventor YASSER H. ALSAF COMPLETE IF KNOWN Application Number / Filing Date CONCURRENTLY Group Art Unit	

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names									
are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD FOR DETERMINING NORMAL MEASUREMENT FOR A PATIENT									
MENOS REMEMBERS TO STATE AT LETT									
the specification of which	(Title of th	ne Invention)							
is attached hereto									
OR									
was filed on (MM/DD	/YYYY) 12/20/2002	as United States Ap	plication Number o	r PCT International					
Application Number	60/435,235 and	was amended on (MM/DD/Y	YYY)	(if	applicable).				
I hereby state that I have revie specifically referred to above.	ewed and understand the conte	ents of the above identified sp	ecification, includin	g the claims as am	ended				
applications, material informat	close information which is mate ion which became available be continuation-in-part application.	tween the filing date of the pr	in 37 CFR 1.56, in ior application and	cluding for continua the national or PC1	ation-in-part 「				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy	Attached?				
	Country	(WINDD/TTTT) Country	Not Claimed	YES	NO				
`	·								
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SP/02P attached beauty									

[Page 1]

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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements r believed to be true; and further that t punishable by fine or imprisonment, application or any patent issued ther	hese statements were or both, under 18 U.S.(made with the ki	nowledge	that will	ful false sta	ements and the like so	made are
NAME OF SOLE OR FIRST	INVENTOR:	A petiti	on has	been fi	iled for th	is unsigned inven	tor
Given Name Yasser H. Family Name ALSAFADI or Surname							
Inventor's Signature	Lee	L			Date	9/26/26	> 0 3
Yorktown Heights		New York		United	l States	United States	
Residence: City		State		Count	try	Citizenship	
2227 Mohansic Avenue Mailing Address							
Yorktown Heights		NY		10598	;	US	
City		State		Zip		Country	
NAME OF SECOND INVEN	TOR: Ap	etition has be	een file	d for th	is unsign	ed inventor	
Given Name La (first and middle [if any])	arry J.			ily Nam urname		ELMAN	
Inventor's Luny	1 Eshel	nn			Date	Soft 26,2	003
Ossining	y - 2	New York		United	States	United States	
Residence: City		State		Count	try	Citizenship	
62 Linden Avenue, Apt. 2							
Mailing Address		 					
Ossining		NY		10562		US	
City		State		Zip		Country	
Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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Country		Teleph	ione		Fax	
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NAME OF SOLE OR FIRST INVENTOR:	☐ A petiti	ion has	been f	iled for th	is unsigned inventor	
Given Name Xinxin Family Name ZHU or Surname						
Inventor's Signature Quising	a.			Date	09/26/2003	
Croton-On-Hudson	New York		United	l States	China	
Residence: City	State		Count	iry	Citizenship	
24 Scenic Circle						
Mailing Address						
Croton-On-Hudson	NY		10520		US	
City	State		Zip		Country	
NAME OF SECOND INVENTOR: A p	etition has be	een file	d for th	is unsign	ed inventor	
Given Name Amr F. (first and middle [if any])			ily Nam urname		SIN	
Inventor's Signature				Date		
Ossining	New York		United	l States	United States	
Residence: City	State	State Country		Citizenship		
111 South Highland Avenue, Apt. 24						
Mailing Address	1		, 			
Ossining	NY		10562		us	
City	State		Zip		Country	
Additional inventors are being named on the	supplemental	Addition	al Invento	or(s) sheet(s	s) PTO/SB/02A attached hereto.	

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NAME OF SOLE OR FIRST INVENTOR:	A petiti	on has	been f	iled for th	is unsigned inventor		
Given Name Xinxin (first and middle [if any])			ily Nam urname				
Inventor's Signature Date							
Croton-On-Hudson	New York		United	l States	China		
Residence: City	State		Country		Citizenship		
24 Scenic Circle							
Mailing Address							
Croton-On-Hudson	NY		10520		US		
City	State		Zip		Country		
NAME OF SECOND INVENTOR: A p	etition has be	een file	d for th	is unsign	ed inventor		
Given Name Amr F. (first and middle [if any])			ily Nam urname	e YASS	iin		
Inventor's Signature X				Date X	23/v		
Ossining	New York		United	States	United States		
Residence: City	State		Count	try	Citizenship		
111 South Highland Avenue, Apt. 24							
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Ossining	NY		10562		US		
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Additional inventors are being named on the	supplemental	Additiona	al Invento	or(s) sheet(s) PTO/SB/02A attached hereto.		

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Å.

NAME OF SECOND INVENTOR:

Additional inventors are being named on the

Given Name

Inventor's

Signature

City

(first and middle [if any])

- Utility or Design Patent Application **DECLARATION -**Direct all correspondence to: Customer Number OR 24737 Correspondence address below or Bar Code Label Name **Address** ZIP State City Telephone Fax Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor **SLUIS Family Name** Given Name or Surname (first and middle [if ക്റിം)]) Inventor's Date 2003 Signature **United States United States** Washington W. Mukilteo State Country Citizenship Residence: City 12823 60th Avenue **Mailing Address** บร WA 98275 W. Mukilteo State Zip Country City A petition has been filed for this unsigned inventor

Residence: City	State	Country	Citizenship	
Residence. Ony		,		
Mailing Address				

Family Name

Zip

Date

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Country

or Surname

State

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

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Signatur	e ////		16 11	and 1			4 Januar	v 2005
Name	Michae	1 E.	Marion					
Title			Representat	ive		relebuon	8(314) 3	33-9637
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This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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10/537874 JC09 Rec'd PCT/PTO 07 JUN 2005

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Corporate Counsel Title

May 31, 2005

(914) 333-9627

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